

## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Sequence Submission?:: Paper  
Computer Readable Form (CRF)?:: Yes  
Number of copies of CRF:: 1  
Title:: Anti-fibril Peptides  
Attorney Docket Number:: 0212.1 Hammer  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 4  
Total Drawing Sheets:: 9  
Small Entity?:: Yes  
Licensed US Govt. Agency:: Nat'l Institutes of Health  
Contract or Grant Numbers:: 1R01 AG17983-01

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Middle Name:: P.  
Family Name:: Hammer  
City of Residence:: Baton Rouge  
State or Province of Residence:: Louisiana  
Country of Residence:: US  
Street of mailing address:: 4967 Tulane Drive  
City of mailing address:: Baton Rouge  
State or Province of mailing address:: Louisiana

Country of mailing address:: US

Postal or Zip Code of mailing address:: 70808

Applicant Authority Type:: Inventor

Primary Citizenship Country:: CN

Status:: Full Capacity

Given Name:: Yanwen

Family Name:: Fu

City of Residence:: San Diego

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 9585 Genesee Avenue, Apt. #A1

City of mailing address:: San Diego

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 92121

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jed P.

Family Name:: Aucoin

City of Residence:: Baton Rouge

State or Province of Residence:: Louisiana

Country of Residence:: US

Street of mailing address:: 11070 Mead Road, Apt. #1413

City of mailing address:: Baton Rouge

State or Province of mailing address:: Louisiana

Country of mailing address:: US

Postal or Zip Code of mailing address:: 70816

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Tod  
Middle Name:: J.  
Family Name:: Miller  
City of Residence:: Smyrna  
State or Province of Residence:: Tennessee  
Country of Residence:: US  
Street of mailing address:: 424 St. Francis Avenue  
City of mailing address:: Smyrna  
State or Province of mailing address:: TN  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 27167

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Mark  
Middle Name:: L.  
Family Name:: McLaughlin  
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State or Province of Residence:: Florida  
Country of Residence:: US  
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City of mailing address:: Tampa  
State or Province of mailing address:: FL

Country of mailing address:: US

Postal or Zip Code of mailing address:: 33620

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robin L.

Family Name:: McCarley

City of Residence:: Prairieville

State or Province of Residence:: Louisiana

Country of Residence:: US

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City of mailing address:: Prairieville

State or Province of mailing address:: Louisiana

Country of mailing address:: US

Postal or Zip Code of mailing address:: 70769

#### **Correspondence Information**

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#### **Representative Information**

Representative Customer Number::	25547
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#### **Domestic Priority**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	Non-provisional of	60/412,081	09/19/02